

GENERAL SERVICES ADMINISTRATION

[OMB Control No. 3090–00XX; Docket No. 2020–0001; Sequence No. 2]

Information Collection; Technology Transformation Services—Candidate Experience Surveys

AGENCY: Technology Transformation Services (TTS), Federal Acquisition Service (FAS), General Services Administration (GSA).

ACTION: Notice.

SUMMARY: Under the provisions of the Paperwork Reduction Act, the Regulatory Secretariat Division will be submitting to the Office of Management and Budget (OMB) a request to review and approve a new information collection requirement regarding sending candidate surveys to all applicants who apply to jobs within the Technology Transformation Services (TTS).

DATES: Submit comments on or before September 28, 2020.

ADDRESSES: Written comments and recommendations for this information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting “Currently under Review—Open for Public Comments” or by using the search function. If your comment cannot be submitted using www.reginfo.gov/public/do/PRAMain, call or email the points of contact in the **FOR FURTHER INFORMATION CONTACT** section of this document for alternate instructions.

FOR FURTHER INFORMATION CONTACT: Requests for additional information should be directed to Jennifer Moran, Technology Transformation Services at 202–501–4755 or via email to jennifer.moran@gsa.gov.

SUPPLEMENTARY INFORMATION:

A. Purpose

The goal of TTS is to modernize the way the government uses technology by applying modern methodologies and technologies to improve the public’s experience with government. In order to accomplish this, we need to be able to attract top technical talent from across the country. This often means competing for talent with the private sector, where companies can often offer more robust compensation and benefits.

In order to remain competitive, it is vital that we provide an exceptional candidate experience and maintain a strong brand reputation. Some of the ways we strive to do this is through

providing clear job descriptions, thorough interview preparation and personalized candidate experience throughout the process. In doing so, we are better able to recruit more candidates into doing a tour of duty in the government. Candidate Surveys are a way for us to continuously measure how we are doing and make any necessary improvements to our hiring process so we can continue to hire and attract the top talent we need at the rate we need them in this demanding market.

By consistently asking applicants and candidates for their feedback and reviewing the survey results, we can pinpoint what areas in our process need to be modified, changed, removed, and/or added. Surveys allow respondents to remain anonymous and will be sent out three times during the hiring process:

- After a candidate applies to a role. Data at this stage will help us understand if our job descriptions provide a clear understanding of the roles and responsibilities that we are hiring for. It will also help us understand if our website has thorough enough information about the overall hiring process or if there are more resources that we can be providing.
- After a candidate interviews. Data at this stage will help us understand if we are properly preparing candidates and interviewers for interviews.
- When the candidate is Selected or Not Selected after the Interview. Data at this stage will help us understand what the candidate’s experience was with their TTS recruiter overall and if there is anything they think we can improve upon.

B. Annual Reporting Burden

Respondents: 7,400.

Responses per Respondent: 1–3.

Total Annual Responses: 1,110.

Hours per Response: 5 minutes per survey.

Total Burden Hours: 15 minutes for candidates who complete all 3 surveys.

C. Public Comments

A notice published in the **Federal Register** at 85 FR 32394 on May 29, 2020. No comments were received.

Beth Anne Killoran,

Deputy Chief Information Officer.

[FR Doc. 2020–18959 Filed 8–27–20; 8:45 am]

BILLING CODE 6820–34–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–20–20ML; Docket No. CDC–2020–0096]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled “Cruise Operator COVID–19 Response Plans,” which will provide CDC with the ability require cruise ship operators to submit plans outlining their response procedures for preventing the spread of COVID–19 onboard, and for preventing the use of scarce U.S. domestic resources in response to COVID–19 cases originating on cruise ships.

DATES: CDC must receive written comments on or before October 27, 2020.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2019–0096 by any of the following methods:

- *Federal eRulemaking Portal:* Regulations.gov. Follow the instructions for submitting comments.

- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS–D74, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to Regulations.gov.

Please note: Submit all comments through the Federal eRulemaking portal (regulations.gov) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, of the Information Collection Review

Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email: omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected; and
4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses.
5. Assess information collection costs.

Proposed Project

Cruise Operator COVID-19 Response Plans—New—National Center for Emerging Zoonotic and Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC)

Background and Brief Description

Recent CDC actions in response to COVID onboard maritime vessels has shown that cruise ship travel markedly increases the risk and impact of the COVID-19 disease outbreak within the United States. If unrestricted cruise ship passenger operations are permitted to resume after the March 14, 2020 No Sail Order, infected and exposed cruise ship cases would place healthcare workers at substantial increased risk. Specifically, these cases would divert medical resources away from persons with other medical problems and other COVID-19 cases, consuming precious diagnostics, therapeutics, and protective equipment. Ongoing concerns with cruise ship transmission would further draw valuable resources away from the immense Federal, state, and local effort to contain and mitigate the spread of COVID-19. Further, the current ongoing non-passenger operation of cruise ships has not sufficiently abated the public health concern, as ship crews become sick and require medical care drawing on otherwise engaged Federal, state, and local resources. As operators of non-U.S. flagged vessels sailing in international waters, it is imperative that the cruise ship industry and cruise lines themselves take responsibility for the care of their crew and do not further tax limited U.S. resources during a public health emergency.

CDC is therefore implementing a requirement within an extended No Sail Order that obligates cruise operators to develop and implement a plan that adequately prevents, mitigates, and responds to the spread of COVID-19 on board cruise ships and ensures that any

disembarkation of passengers or crew is conducted in such a way as to not result in further spread of COVID-19. An appropriate plan shall not significantly burden U.S. government operations or the operations of any state or local government, including the U.S. healthcare system. The cruise ship operator shall further ensure that the plan is consistent with CDC recommendations and guidance for any public health actions related to COVID-19. As a condition of the granting of controlled free pratique to continue to engage in any cruise ship operations in any international, interstate, or intrastate waterways subject to the jurisdiction of the United States, the cruise ship operator shall present the plan, upon request, to U.S. Coast Guard and HHS/CDC personnel.

Within these plans are notification requirements that obligate cruise ship operators to provide CDC and local health departments in the follow circumstances:

- Disembarking U.S. residents who plan to leave the ships and travel by private transport
- Disembarking crew to the United States for repatriation via non-commercial travel to home countries
- Crew transfers for purposes such as maintaining Minimum Safe Manning standards

In addition, cruise ship operators can choose to submit an attestation statement to CDC attesting that their ship is free of COVID-19. If this is statement is accepted, cruise ship operators have the option to repatriate their crew via commercial travel.

There are no costs to respondents other than their time to develop and submit the plan and the required notifications to CDC, U.S. Coast Guard, and the local or state health authority, as directed.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondent	Form	Number of respondents	Number of responses per respondent	Average burden per response (in minutes)	Total burden hours
Cruise ship operator	COVID-19 Response Plan (no form).	100	1	2,400/60	4,000
Cruise ship operator	72-hour notification to CDC of disembarkation or U.S. residents for private travel.	100	5	5/60	42
Cruise ship operator	72-hour notification to state/local health department of disembarkation for crew repatriation.	100	2	5/60	17
Cruise ship operator	72-hour notification for crew transfers.	100	5	5/60	42

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Respondent	Form	Number of respondents	Number of responses per respondent	Average burden per response (in minutes)	Total burden hours
Cruise ship operator	Attestation statement of COVID-19 free ship (for repatriating crew via commercial travel).	100	1	20/60	33
Total	4,134

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-20-1218; Docket No. CDC-2020-0091]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled “Evaluation of Medication-Assisted Treatment (MAT) for Opioid use disorder.” CDC will use the collection to continue the epidemiologic study to assess the type of MAT (methadone maintenance; buprenorphine; naltrexone; or, counseling, no MAT), and the contextual, provider, and individual factors that influence implementation and improved patient wellbeing.

DATES: Written comments must be received on or before October 27, 2020.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2020-0091 by any of the following methods:

- *Federal eRulemaking Portal:*

Regulations.gov. Follow the instructions for submitting comments.

- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *Regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS-D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email: *omb@cdc.gov.*

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
2. Evaluate the accuracy of the agency’s estimate of the burden of the proposed collection of information,

including the validity of the methodology and assumptions used;

3. Enhance the quality, utility, and clarity of the information to be collected; and

4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses.

5. Assess information collection costs.

Proposed Project

Evaluation of Medication-Assisted Treatment (MAT) for Opioid Use Disorder—Revision—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC)

Background and Brief Description

CDC seeks a one-year OMB approval to continue collecting data for Medication-Assisted Treatment (MAT) for Opioid use disorder. Approximately 2.4 million people aged 18 or older have opioid use disorders (OUDs) in the United States. At any given time, only half of these people receive some form of treatment, which may include medication-assisted treatment (MAT) or abstinence-based psychotherapy or self-help treatments (*i.e.*, counseling without medication [COUN]). The rise in opioid overdose deaths, up from 2014–2015 due partly to a 72% rise in synthetic opioid overdose deaths alone, shows that engaging and retaining clients in OUD treatment is an urgent public health need. Only a few studies are available to help clients and providers make informed decisions about the risks and benefits associated with the different types of MATs. This information is crucial because even though each MAT drug helps prevent withdrawal symptoms and decreases cravings, differences in treatment approach and settings influence how people respond to the medication and, thus, their long-term treatment success.